## Podiatrist Provider Type 80 907 KAR 1:270

## **Information about the program:**

- All Podiatry providers must be licensed by the state in which they practice.
   The licensing authority for Kentucky is the Kentucky Board of Podiatry.
- Out-of-state providers may enroll.

## Additional information to be submitted by the provider for application processing:

- MAP-811 Individual and KAPER-1/CAQH
- MAP-811 Addendum E
- Map-347 (if working in group setting)
- Copy of Social Security card or notarized statement signed by the applicant if applicant does not own a tax id.
- If applicant is sole owner of a tax id, need to submit W-9 form.
- State license (current and reflecting requested enrollment date).
- CLIA license (if applicable)
- NPI and Taxonomy Verification

## **Important addresses:**

- Kentucky Board of Podiatry 908B South 12<sup>th</sup> Street Murray, KY 42071 270-759-0007
- KY Medicaid
   Provider Enrollment
   P.O. Box 2110
   Frankfort, KY 40602